

**Mental Health and Addiction Transformation Work Group
Consumer/Family Involvement Sub-Committee Meeting
NOTES December 12, 2006**

Members present: Ryan McCarty, Susan Pieples, Ruth Summers, Dr. Tim Stultz, Kellie Meyer, Ronda Ames, Mike Connor and Rosie Carney

Deb Herrmann, lead staff from the Relationship management subcommittee, met with our committee on Dec 12th at noon to 1:00 before the large TWG to discuss their committee's work to date, and get our feedback on changes to providers' contracts by measuring performance on specific outcomes. Before presenting the subcommittee's work, Deb asked the CFI members what concerns they might have about performance measurement. Concerns voiced by members present were what the incentives and disincentives might be, whether the outcomes measures might discourage providers from serving the difficult to serve client, and concerns that the process of serving the consumer is as important as the outcomes achieved.

1. Overview of current system (HAP/CSDS/NOMS):

Under the present Hoosier Assurance Plan (HAP) providers are contracted to enroll individuals and payment to the provider is based on the enrollment data the provider enters into the Community Service Data System (CSDS). The present system does not look at what happens after the initial enrollment date. This has caused the policy planners to question whether there is any accountability on the provider to give quality care.

The Community Service Data System (CSDS) is used to enroll and collect data on only those persons served who are at 200% of the federal poverty level or lower. The data requested from the providers is collected by the Division primarily in order to be able to submit the National Outcomes Measures (NOMS) to the federal government. This is a requirement Indiana must meet in order to receive the annual federal Mental Health Block grant funding. Because this data must continue to be collected and reported to the feds, the CSDS will continue to be used. The Division plans to establish some new performance standards and then measure the performance outcomes for each provider. The Relationship Management work groups decided to use the NOMS for performance contracting to begin in state fiscal year SFY 08, which begins on July 1, 2007, with a clear focus on the Recovery model and consumers and families. To this point there has been hardly any consumer and family involvement. Consumers and families will be able to be involved in defining measures for SFY 09 and beyond.

2. Overview of Relationship Management/Performance Contracting:

RELATIONSHIP MANAGEMENT TIMELINE OF ACTIVITY:

October, 2005 – Introduce Relationship Management process at the Mental Health Systems Transformation Kick off meeting (Dr. Green presentation/breakout session)

March, 2006 – DMHA Core group mtng – Market/Spend/Business analysis kicks off

June, 2006 – Conclude internal analysis, establish parameters for contracting, and develop plan for partnering with contract treatment providers

July, 2006 – Initial meeting between DMHA and Provider Development Group: review and recommend performance measure for performance contracting beginning SFY 2008

August, 2006 – Regional small group meetings with Development group agencies and networks to review group recommendations regarding proposed performance measures; distribute recommendations to all contract treatment providers

August, 2006 – DMHA.OMPP coordinate selection of performance measures.

September, 2006 – Series of regional meetings to build consensus on performance measures for contracting.

RELATIONSHIP MANAGEMENT PLAN:

- **October, 2006** – Present recommendations to Transformation Work Group
- **October, 2006** – Provider/DMHA work groups meet to revise language and methodology for recommended measures
- **October, 2006** – DMHA staff continues work with OMPP and Hoosier Health Wise MCOs. Referred names of (4) provider QA staff for inclusion in an OMPP/MCO kick off meeting and advisory group scheduled for November 2006.
- **SFYQ2 2006** – Develop strategy and implementation plan for future performance based contracting. Continue to improve and finalize language and methodology.
- **January, 2007** – Write performance based contracts for SFY2008
- **SFYQ4 2006/SFYQ1 2007** – Work Groups develop SFY2009 metrics
- **July, 2007** – Implement SFY2008 year 1
- **August, 2007** – Relationship Management reviews begin

3. Overview of Proposed Measures:

A. Outcomes: Metrics Based on National Outcome Measures (NOMS)

- Employment/School- Increased or retained employment (SFY08)
- Criminal Justice Involvement (SFY08)
- Housing/Homelessness (SFY08)
- Retention (Addiction) (SFY 08)
- Change in Use Pattern (Addiction) (SFY08)
- Cost Effectiveness – Baseline (SFY08)
- Evidence Based Practices (SFY09)
- Access/Capacity (SFY09)
- Perception of Care (SFY09)

B. Process Metrics Not Based on NOMS

- Business Measures
 - Timeliness/Quality of Data submission (SFY08)
 - Percentage of reassessments time one to time two (SFY08)
- State/DMHA accountability measures (SFY08)
- Level of Care and Level of Functioning- CANS/ Adult tool (TBA) (SFY09)
- Coordination of Care – possible use of Consumer Service Review (CSR) (SFY09)
- Items for future consideration: measures related to individuals with Co-occurring disorders and/or Problem Gambling

4. Discussion/feedback on possible ways to encourage/facilitate recovery focus and expectation in service delivery:

Due to the TWG meeting we ran out of time, but the input of this committee will continue. Data section has offered to attend our meetings and discuss the CSDS and data collection in further detail. Much of the data collection reports and information is on the FSSA / DMHA website, and the reports on numbers of persons served, prevalence of mental illness and addiction and penetration rates can be located at: <http://www.in.gov/fssa/mental/data.htm>

The next meeting will be at KEY, 2506 Willowbrook Parkway, Suite 199, on January 23rd at 1:00pm.

Respectfully Submitted,

Rosie Carney, DMHA Lead Staff, TWG Subgroup on Consumer/Family Involvement